## Reviewing your Aetna administrative service contract/stop loss statement

Keep this document for future reference.



This brochure will help you understand your monthly bill and familiarize you with its standard format; please use it as an ongoing reference tool. We want to ensure that your bill is accurate and easy to understand.

We want you to know Actna

### Reviewing your Aetna administrative service contract/stop loss statement

This invoice represents your benefits that are funded through an Administrative Service Contract (ASC) with or without Stop Loss. The statement(s) is generated in advance of your billing due date, and remittance should be made no later than the reflected payment due date. It is important that you return all of the invoice pages and display the total amount due on the final page as we will use these figures to prepare your Employee Benefits Plan Annual Financial Reports.

- 1. Aetna<sup>‡</sup> address to which you should remit your payment.
- 2. Your company name and address.
- 3. Outlines various administrative details regarding your account.
  - Customer Number: Number used to identify your account and should be included on all correspondence and forms.
  - Billing Arrangement Number: Number used to identify billing structure for a specific group of benefits.
  - SFO/Customer Team: The name and number of the Aetna field office which is responsible for servicing your account.
  - Invoice Month: Identifies the month in which the activity takes place; e.g., 3/07 would represent the activity between 2/1/07 and 2/28/07.
  - Prepared Date: The date the invoice was prepared.
  - Page Number: Some invoices will have multiple lines and each page will reflect the page number.
  - **Invoice Type:** Identifies the invoice as either ASC or Stop Loss type.
  - Wire Line Number: If applicable, this identifies the wire line number used to submit claims.
  - **Region:** Internal Aetna purposes only.

- 4. Used to enter the amount of total current due plus any outstanding due amounts not paid to date.
- 5. Reminder that remittance address is located on reverse side of the bill.
- Describes the benefits or services that are being billed in each service line.
- 7. The volume equals the number of lives for the corresponding benefit/service.
- 8. Rate you should use to calculate the premium or fee for the corresponding benefit/service.
- PER EE: Per Employee.
- NA/Special Charge: A service line billed on a flat fee.
- NS/EE: No Structure Per Employee.
- 9. Total amount due for the corresponding benefit/service.
- The adjustment amount should include any adjustments that are due as a result of retroactive rate or volume changes.
- 11. Total current month due including adjustments.
- 12. If applicable, messages will appear that pertain to specific items on the invoice.

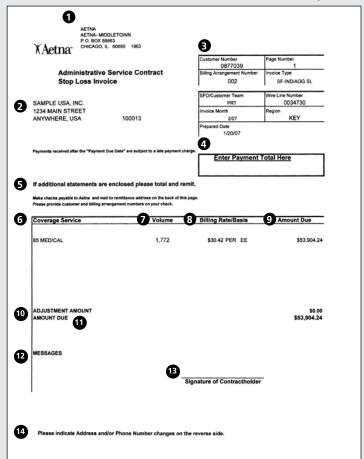
# 13. Signature of the contract holder or authorized representative which

indicates the information you have presented on the form is correct.

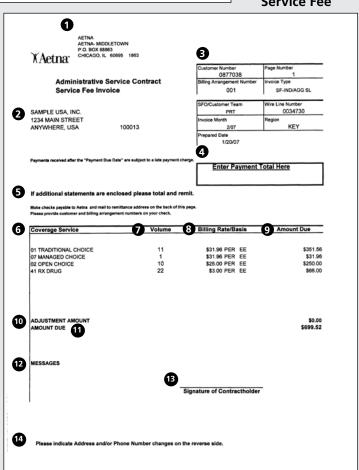
14. Space should be used to indicate changes that have occurred to your address and/or phone number since remitting your last payment.

#### **Service Fee Billing**

#### **Stop Loss**



#### Administrative Service Fee



For illustrative purposes only.



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<sup>&</sup>lt;sup>‡</sup>Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies. The Aetna companies that offer, underwrite or administer benefits coverage include Aetna Health Inc., Aetna Health of California Inc., Aetna Health of the Carolinas Inc., Aetna Health of Illinois Inc., Aetna Dental Inc., Aetna Dental of California Inc., Aetna Life Insurance Company, Aetna Health Insurance Company of New York, Corporate Health Insurance Company through December 31, 2007/Aetna Health Insurance Company effective January 1, 2008, and Aetna Health Administrators, LLC (Aetna).